Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF MISSOURI	-	
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

04/20

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	rt 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
		e the name that is on	Brian	
		government-issued are identification (for	First name	First name
	exar	mple, your driver's use or passport).	Joseph	
			Middle name	Middle name
	iden	g your picture tification to your ting with the trustee.	Raines Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	use	other names you have d in the last 8 years		
		ide your married or den names.		
3.	you num Indi	y the last 4 digits of r Social Security aber or federal vidual Taxpayer atification number	xxx-xx-7767	

Debtor 1 Brian Joseph Raines

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s) EIN	☐ I have not used any business name or EINs. Business name(s) EIN
5.	Where you live	2505 Wild Fire Ct	If Debtor 2 lives at a different address:
		Arnold, MO 63010 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Jefferson	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

Debtor 1 Brian Joseph Raines Pg 3 of 63 Case number (if known)

Par	Tell the Court About	our B	ankruptcy Ca	se				
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. Chapter 7						
	choosing to file under							
		□с	hapter 11					
		□с	hapter 12					
		□с	hapter 13					
8.	How you will pay the fee	•	about how yo	u may pay. Tyր attorney is sub	pically, if you are paying the fee yo	k with the clerk's office in your local court for more deta urself, you may pay with cash, cashier's check, or mon alf, your attorney may pay with a credit card or check wi		
					tallments. If you choose this option to (Official Form 103A).	tion, sign and attach the Application for Individuals to Pay		
			I request that but is not req	t my fee be wa uired to, waive	aived (You may request this option your fee, and may do so only if yo	n only if you are filing for Chapter 7. By law, a judge ma ur income is less than 150% of the official poverty line to ininstallments). If you choose this option, you must fill or		
						ial Form 103B) and file it with your petition.		
9.	Have you filed for bankruptcy within the last 8 years?	■ No						
	iast o years?	□ Ye			Mhan	Coop number		
			District		When When	Case number Case number		
			District District		When	Case number Case number		
			District			Case number		
10.	Are any bankruptcy cases pending or being	■ No)					
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	□ Y€	es.					
			Debtor			Relationship to you		
			District		When	Case number, if known		
			Debtor			Relationship to you		
			District		When	Case number, if known		
11.	Do you rent your residence?	■ No	Go to l	ne 12.				
		□ Ye	es. Has yo	ur landlord obt	ained an eviction judgment agains	t you?		
				No. Go to line	12.			
				Yes. Fill out In this bankruptc		Judgment Against You (Form 101A) and file it as part of		

Debtor 1 Brian Joseph Raines Pg 4 of 63 Case number (if known)

Par	Report About Any Bu	ısinesses '	You Owr	n as a Sole Proprieto	or		
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.			
		☐ Yes.	Name	e and location of busin	ness		
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	e of business, if any			
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	per, Street, City, State	e & ZIP Code		
	it to this petition.		Chec	k the appropriate box	to describe your business:		
	·			Health Care Busine	ess (as defined in 11 U.S.C. § 101(27A))		
				Single Asset Real I	Estate (as defined in 11 U.S.C. § 101(51B))		
				Stockbroker (as de	fined in 11 U.S.C. § 101(53A))		
				Commodity Broker	(as defined in 11 U.S.C. § 101(6))		
				None of the above			
13.	Are you filing under Chapter 11 of the Bankruptcy Code, and are you a small business debtor or a debtor as defined by 11 U.S.C. § 1182(1)? For a definition of small business debtor, see 11	proceed you are cocash-flow § 1116(1)	re filing under Chapter 11, the court must know whether you are a small business debtor or a debtor choosing to d under Subchapter V so that it can set appropriate deadlines. If you indicate that you are a small business debtor of choosing to proceed under Subchapter V, you must attach your most recent balance sheet, statement of operation by statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S. 1)(B). I am not filing under Chapter 11.				
	U.S.C. § 101(51D).	□ No.	Code I am f	iling under Chapter 1	1, but I am NOT a small business debtor according to the definition in the Bankruptcy 1, I am a small business debtor according to the definition in the Bankruptcy Code, and 1, I am a small business debtor according to the definition in the Bankruptcy Code, and		
		☐ Yes.	I am f	iling under Chapter 1	I under Subchapter V of Chapter 11. 1, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I Subchapter V of Chapter 11.		
Par	Report if You Own or	Have Any	Hazardo	ous Property or Any	Property That Needs Immediate Attention		
14.	Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to	■ No. □ Yes.	What is	the hazard?			
	public health or safety? Or do you own any property that needs immediate attention?			diate attention is why is it needed?			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?	Number, Street, City, State & Zip Code		

Debtor 1 Brian Joseph Raines

Pg 5 of 63 Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 □ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

	Case 22-408	322 C	Ooc 1 Filed 03		Entered 03/25/22 10:	27:22 Main Document	İ	
Deb	otor 1 Brian Joseph Rair	nes		Pg (of 63 Case nu	umber (if known)		
Par	t 6: Answer These Questi	ions for R	leporting Purposes					
16.	What kind of debts do you have?	16a.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."					
			■ No. Go to line 16b).				
			☐ Yes. Go to line 17	′ .				
		16b.			ss debts? Business debts are d			
			☐ No. Go to line 16d					
			■ Yes. Go to line 17	′ .				
		16c.	State the type of deb	ts you owe th	at are not consumer debts or bu	siness debts		
17.	Are you filing under Chapter 7?	□ No.	I am not filing under (Chapter 7. Go	o to line 18.			
	Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will	■ Yes.	I am filing under Cha are paid that funds w	I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expense are paid that funds will be available to distribute to unsecured creditors?				
			■ No					
	be available for distribution to unsecured creditors?		□ Yes					
18.	How many Creditors do you estimate that you	1 -49			<u> </u>	<u></u> 25,001-50,000		
	owe?	☐ 50-99 ☐ 100-1			☐ 5001-10,000 ☐ 10,001-25,000	☐ 50,001-100,000 ☐ More than100,000		
		☐ 200-9			_ 10,001 20,000	_ more than recipes		
19.	How much do you estimate your assets to	□ \$0 - \$50,000			□ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion			
	be worth?)01 - \$100,000 ,001 - \$500,000		□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million	□ \$1,000,000,001 - \$10 □ \$10,000,000,001 - \$50		
			,001 - \$1 million		□ \$100,000,001 - \$500 million			
20.	How much do you	□ \$0 - \$	' '		□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 bill		
	estimate your liabilities to be?	□ \$50,001 - \$100,000 □ \$100,001 - \$500,000			□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million	□ \$1,000,000,001 - \$10 □ \$10,000,000,001 - \$5		
		■ \$500,001 - \$1 million		□ \$100,000,001 - \$500 million				
Par	t 7: Sign Below							
For	For you I have e		nave examined this petition, and I declare under penalty of perjury that the information provided is true and correct.					
Unite If no			If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.					
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).						
		I request	t relief in accordance w	ith the chapte	er of title 11, United States Code	, specified in this petition.		
			tcy case can result in fi			ney or property by fraud in connection 20 years, or both. 18 U.S.C. §§ 152		

Signature of Debtor 2

MM / DD / YYYY

Executed on

/s/ Brian Joseph Raines Brian Joseph Raines Signature of Debtor 1

Executed on March 25, 2022

MM / DD / YYYY

Debtor 1 Brian Joseph Raines

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Robert E. Eggmann Signature of Attorney for Debtor	Date	March 25, 2022 MM / DD / YYYY
Robert E. Eggmann 37374 Printed name		
Carmody MacDonald P.C.		
120 S. Central Ave., Suite 1800 Saint Louis, MO 63105		
Number, Street, City, State & ZIP Code		
Contact phone 314-854-8600	Email address	ree@carmodymacdonald.com
37374 MO		
Bar number & State		

Fill in this infor	mation to identify your	case:	Py 8 01 03	
Debtor 1	Brian Joseph Rai	ines		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	F MISSOURI	
Case number				
(if known)				Check if this is an amended filing
				amonada ming

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

•			
Par	t 1: Summarize Your Assets		
			assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	69,952.37
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	608,882.31
	1c. Copy line 63, Total of all property on Schedule A/B	\$	678,834.68
Par	rt 2: Summarize Your Liabilities		
			liabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	146,867.83
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	216,119.20
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	496,254.93
	Your total liabilities	\$	859,241.96
Pai	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	10,000.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	16,573.31
Par	Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other so	chedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a persona	ıl, family, or

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

page 1 of 2

the court with your other schedules.

Debtor 1 Brian Joseph Raines Pg 9 of 63 Case number (if known)

8. From the <i>Statement of Your Current Monthly Income</i> : Copy your total current monthly income from Official Form 122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.	\$
---	----

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim
From Part 4 on Schedule E/F, copy the following:	
9a. Domestic support obligations (Copy line 6a.)	\$
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$
9d. Student loans. (Copy line 6f.)	\$
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$
9g. Total. Add lines 9a through 9f.	\$

Filed 03/25/22 Entered 03/25/22 10:27:22 Main Document Case 22-40822 Doc 1

Fill in this information to identify your case and this filing: Debtor 1 **Brian Joseph Raines** Middle Name Last Name First Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: EASTERN DISTRICT OF MISSOURI Case number ☐ Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? ■ No. Go to Part 2. Yes. Where is the property? What is the property? Check all that apply **Grand Vacations Services** ☐ Single-family home Do not deduct secured claims or exemptions. Put Sunrise Park City, LLC the amount of any secured claims on Schedule D: Duplex or multi-unit building Creditors Who Have Claims Secured by Property. 6355 Metrowest Blvd. Condominium or cooperative Street address, if available, or other description ■ Manufactured or mobile home Current value of the Current value of the Orlando FL 32835-0000 ☐ Land entire property? portion you own? City State ZIP Code Investment property \$25,335.87 \$25,335.87 Timeshare Describe the nature of your ownership interest □ Other (such as fee simple, tenancy by the entireties, or a life estate), if known. Who has an interest in the property? Check one Debtor 1 only **Orange** ☐ Debtor 2 only County ☐ Debtor 1 and Debtor 2 only Check if this is community property At least one of the debtors and another (see instructions)

> Other information you wish to add about this item, such as local property identification number:

Timeshare: Hilton Timeshare

Official Form 106A/B Schedule A/B: Property page 1

Debt	tor 1 Brian Joseph Raines	Pg 11 01 03 Case	e number (if known)		
	If you own or have more than one, list				
1.2	The Grand Islander Waikiki Honolulu 6355 Metrowest Blvd. Attn: Portfolio Services Street address, if available, or other description	What is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative	Do not deduct secured cla the amount of any secured Creditors Who Have Claim	d claims on Schedule D:	
-	Orlando FL 32835-0000 City State ZIP Code Orange County		Current value of the entire property? \$44,616.50 Describe the nature of yo (such as fee simple, tena a life estate), if known.	ancy by the entireties, or	
		Other information you wish to add about this item, such as local property identification number: Timeshare			
some	ou own, lease, or have legal or equitable int	erest in any vehicles, whether they are registered out it on Schedule G: Executory Contracts and Underles, motorcycles		hicles you own that	
	No Yes				
3.1	Model: F150 Year: 2019 Approximate mileage: 21109 Other information:	Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Do not deduct secured clathe amount of any securer Creditors Who Have Claim Current value of the entire property?	d claims on <i>Schedule D:</i>	
	Vehicle:	Check if this is community property (see instructions)	\$55,420.00	\$55,420.00	
3.2	Model: Edge Year: 2021 Approximate mileage: 94	Who has an interest in the property? Check one ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Do not deduct secured clathe amount of any secured Creditors Who Have Claim Current value of the entire property?	d claims on Schedule D:	
		Check if this is community property (see instructions)	\$36,494.00	\$36,494.00	

Official Form 106A/B Schedule A/B: Property page 2

Debtor 1	Brian Joseph Raines	Pg 12 01 63	Case number (if known)	
	craft, aircraft, motor homes, ATVs and oles: Boats, trailers, motors, personal water			
■ No				
☐ Yes				
	the dollar value of the portion you own to so you have attached for Part 2. Write that			\$91,914.00
Part 3:	Describe Your Personal and Household Item	s		
·	own or have any legal or equitable inter	est in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	ehold goods and furnishings pples: Major appliances, furniture, linens, cl	hina, kitchenware		
Ye	s. Describe			
	Misc Household O	Goods		\$6,000.00
7. Electr Exam	ples: Televisions and radios; audio, video, including cell phones, cameras, med		rs, printers, scanners; music co	ollections; electronic devices
	s. Describe			
	<u>,</u>			* 700.00
	Electronics: TV ar	nd Laptop		\$700.00
	ctibles of value orples: Antiques and figurines; paintings, pri other collections, memorabilia, collections		other art objects; stamp, coin,	or baseball card collections;
	s. Describe			
	ment for sports and hobbies uples: Sports, photographic, exercise, and uples musical instruments	other hobby equipment; bicycles, pool ta	bles, golf clubs, skis; canoes a	nd kayaks; carpentry tools;
■ No				
⊔ Ye	s. Describe			
■ No	mples: Pistols, rifles, shotguns, ammunition	n, and related equipment		
⊔ Ye	s. Describe			
11. Clotl <i>Exai</i> □ No	mples: Everyday clothes, furs, leather coat	s, designer wear, shoes, accessories		
	s. Describe			
				£4 000 00
	Clothes: Shoes ar	ia CLotnes		\$1,000.00
□ No	mples: Everyday jewelry, costume jewelry,	engagement rings, wedding rings, heirld	oom jewelry, watches, gems, go	old, silver
- Ye	s. Describe			
	Wedding Ring			\$400.00

Official Form 106A/B

Case number (if known) Debtor 1 **Brian Joseph Raines** \$500.00 Citizen Watch and Apple Watch 13. Non-farm animals Examples: Dogs, cats, birds, horses Π Nο ■ Yes. Describe..... \$0.00 Animals: Cat 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$8,600.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ■ No ☐ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: Yes..... **Checking Account: First Community Credit** \$150.00 Union 17.1. **Regions Bank** \$68.31 17.2. Checking 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No ☐ Yes..... Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and ioint venture □ No Yes. Give specific information about them..... Name of entity: % of ownership: \$0.00 B. Raines & Associates, Inc. 100 % 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. No ☐ Yes. Give specific information about them Issuer name:

Official Form 106A/B Schedule A/B: Property page 4

Case number (if known) Debtor 1 **Brian Joseph Raines** 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans Π Nο Yes. List each account separately. Type of account: Institution name: \$250.00 **IRA** Retirement: IRA 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements □ No Yes. Give specific information about them... Intellectual: Website \$0.00 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ No Yes. Give specific information about them... General Intangibiles: Contractors License \$0.00 Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes, Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else □ No

Official Form 106A/B Schedule A/B: Property page 5

Debtor 1	Brian Joseph Raines	Pg 15 0	Case number (if known)	
■ Yes	s. Give specific information			
		Owed Other: Owed to the bubreach of contract	siness, currently in a lawsuit for	\$7,900.00
	ests in insurance policies nples: Health, disability, or life in	surance; health savings account (HS	A); credit, homeowner's, or renter's insura	ance
■ Yes		of each policy and list its value. ny name:	Beneficiary:	Surrender or refund value:
	Insura	nce: Life Insurance with	Jane Renee Sherman	\$500,000.00
If you some		you from someone who has died rust, expect proceeds from a life insur	rance policy, or are currently entitled to re	ceive property because
<i>Exar</i> ■ No		er or not you have filed a lawsuit o isputes, insurance claims, or rights to		
■ No	r contingent and unliquidated s. Describe each claim	claims of every nature, including c	ounterclaims of the debtor and rights t	to set off claims
■ No	financial assets you did not al	ready list		
	I the dollar value of all of your Part 4. Write that number here		entries for pages you have attached	\$508,368.31
Part 5:	Describe Any Business-Related Pr	operty You Own or Have an Interest In. I	List any real estate in Part 1.	
■ No. (u own or have any legal or equitab Go to Part 6. Go to line 38.	le interest in any business-related prop	erty?	
	Describe Any Farm- and Commerc f you own or have an interest in farm	ial Fishing-Related Property You Own o land, list it in Part 1.	r Have an Interest In.	
■ N	ou own or have any legal or ed o. Go to Part 7. es. Go to line 47.	quitable interest in any farm- or con	nmercial fishing-related property?	
Part 7:	Describe All Property You Ow	n or Have an Interest in That You Did No	ot List Above	
	ou have other property of any mples: Season tickets, country c			
☐ Yes	s. Give specific information			
54. Add	the dollar value of all of your	entries from Part 7. Write that num	ber here	\$0.00

Schedule A/B: Property

Debtor 1 Brian Joseph Raines Pg 16 of 63 Case number (if known)

Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$69,952.37
56.	Part 2: Total vehicles, line 5	\$91,914.00		
57.	Part 3: Total personal and household items, line 15	\$8,600.00		
58.	Part 4: Total financial assets, line 36	\$508,368.31		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$608,882.31	Copy personal property total	\$608,882.31
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$678,834.68

Official Form 106A/B Schedule A/B: Property page 7

Fill in this infor	mation to identify your	case:		
Debtor 1	Brian Joseph Rai	nes		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		EASTERN DISTRICT O	F MISSOURI	
Case number				
(if known)				☐ Check if this is an
				amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption	
,	Copy the value from Schedule A/B	Che	ck only one box for each exemption.		
2019 Ford F150 21109 miles Vehicle:	\$55,420.00		\$3,000.00	RSMo § 513.430.1(5)	
Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit		
Misc Household Goods Line from Schedule A/B: 6.1	\$6,000.00		\$2,300.00	RSMo § 513.430.1(1)	
Line Holli Schedule A/D. V.1			100% of fair market value, up to any applicable statutory limit		
Electronics: TV and Laptop	\$700.00		\$700.00	RSMo § 513.430.1(1)	
Line nom Schedule A/D. 1.1			100% of fair market value, up to any applicable statutory limit		
Wedding Ring Line from Schedule A/B: 12.1	\$400.00		\$400.00	RSMo § 513.430.1(2)	
Line Irom Schedule A/B. 12.1			100% of fair market value, up to any applicable statutory limit		
Citizen Watch and Apple Watch	\$500.00		\$500.00	RSMo § 513.430.1(2)	
LINE HOLL SCHEUUR AVD. 12.2			100% of fair market value, up to any applicable statutory limit		

De	ebtor 1 Brian Joseph Raines	Case number (if known)			
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	Checking Account: First Community Credit Union	\$150.00		\$150.00	RSMo § 513.430.1(3)
	Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
	Checking: Regions Bank Line from Schedule A/B: 17.2	\$68.31		\$68.31	RSMo § 513.430.1(3)
	Life from Schedule AVD. 17.2			100% of fair market value, up to any applicable statutory limit	
	IRA: Retirement: IRA Line from Schedule A/B: 21.1	\$250.00		\$250.00	RSMo § 513.430.1(10)(f)
	Line IIom Schedule A/B. 21.1			100% of fair market value, up to any applicable statutory limit	
	Insurance: Life Insurance with Beneficiary: Jane Renee Sherman	\$500,000.00		\$150,000.00	RSMo § 513.430.1(7)
Line from Schedule A/B: 31.1				100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption of (Subject to adjustment on 4/01/22 and every 3			led on or after the date of adjustmer	nt.)
	■ No				
	☐ Yes. Did you acquire the property covere	ed by the exemption wi	thin 1	,215 days before you filed this case	?
	□ No				
	☐ Yes				

		Pa 19 of 63			
Fill in this information to identify	y your case:				
Debtor 1 Brian Josep	nh Raines				
First Name	Middle Name	Last Name			
Debtor 2					
(Spouse if, filing) First Name	Middle Name	Last Name			
United States Bankruptcy Court fo	r the: EASTERN DISTRICT	OF MISSOURI			
, ,					
Case number				- 051	Markette de la la
(ii Kilowii)				_	if this is an led filing
<u> </u>				amend	ieu illing
Official Form 106D					
	ore Who Hove Cla	ime Socuroe	l by Droport	.,	40/45
Schedule D: Credite	ors who have Cia	ims secured	by Propert	<u>y</u>	12/15
Be as complete and accurate as poss					
is needed, copy the Additional Page, number (if known).	fill it out, number the entries, and	attach it to this form. Or	the top of any addition	nal pages, write your na	me and case
1. Do any creditors have claims secui	red by your property?				
<u> </u>	omit this form to the court with yo	ur other schedules. Ve	u have nothing else t	a raport on this form	
_	•	di other schedules. To	ou have nothing else t	o report on this form.	
Yes. Fill in all of the information	ation below.				
Part 1: List All Secured Claim	ns				
2. List all secured claims. If a creditor			Column A	Column B	Column C
for each claim. If more than one creditor much as possible, list the claims in alph			Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
inder de pecciole, let ule cialité in alpr	-		value of collateral.	claim	If any
2.1 Ford Motor Credit	Describe the property that	1 -	\$44,046.00	\$55,420.00	\$0.00
Creditor's Name	2019 Ford F150 21109	9 miles			
	Vehicle:				
PO Box 650574	As of the date you file, the	claim is: Check all that			
Dallas, TX 75265	apply. Contingent				
Number, Street, City, State & Zip Code					
,	☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all the	at apply.			
☐ Debtor 1 only	■ An agreement you made	(such as mortgage or sec	ured		
Debtor 2 only	car loan)				
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax	(lien, mechanic's lien)			
At least one of the debtors and another	ther	suit			
☐ Check if this claim relates to a	Other (including a right to	offset)			
community debt					
Date debt was incurred 4/2020	Last 4 digits of acco	unt number 2148			
					
2.2 Ford Motor Credit	Describe the property that	secures the claim:	\$43,495.99	\$36,494.00	\$7,001.99
Creditor's Name	2021 Ford Edge 94 m	iles			
	As of the date you file, the	claim is: Check all that			
P.O. Box 650574	apply.	oralli for oneon an mar			
Dallas, TX 75265	Contingent				
Number, Street, City, State & Zip Code					
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all the	at annly			
Debtor 1 only	_				
Debtor 2 only	An agreement you made car loan)	(such as mortgage or sec	ured		
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax	(lien, mechanic's lien)			
At least one of the debtors and another	_ ′ `				
☐ Check if this claim relates to a	Other (including a right to				
community debt	. ,	,			
Date debt was incurred 2021	Last 4 digits of acco	unt number			
- and door mad invariou ZUZ I	Lust + digits of acco				

Official Form 106D

Debtor 1 Brian Joseph Raines	Ca	ase number (if known)		
First Name Middle N	lame Last Name	•		
Grand Vacations				
2.3 Services, LLC	Describe the property that secures the claim:	\$18,788.56	\$25,335.87	\$18,788.56
Creditor's Name	Grand Vacations Services Sunrise			<u> </u>
	Park City, LLC 6355 Metrowest Blvd.			
	Orlando, FL 32835 Orange County			
Sunrise Park City LLC	Timeshare: Hilton Timeshare			
6355 Metrowest Blvd.	As of the date you file, the claim is: Check all that			
Orlando, FL 32835	apply. □ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
7,	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgage or secu	red		
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a	☐ Other (including a right to offset)			
community debt				
Date daht was incurred 04/4/2016	Look 4 digito of account number AGAA			
Date debt was incurred 01/1/2016	Last 4 digits of account number 4641			
2.4 The Grand Islander Waikiki Honolulu	Describe the property that secures the claim:	\$40,537.28	\$44,616.50	\$38,261.00
Creditor's Name	The Grand Islander Waikiki		• ,	
	Honolulu 6355 Metrowest Blvd.			
	Attn: Portfolio Services Orlando, FL			
	32835 Orange County			
6355 Metrowest Blvd.	Timeshare			
Attn: Portfolio Services	As of the date you file, the claim is: Check all that			
Orlando, FL 32835	apply. □ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgage or secu	red		
Debtor 2 only	car loan)			
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a	☐ Other (including a right to offset)			
community debt	· · · · · · · · · · · · · · · · · · ·			
Date debt was incurred 01/1/2018	Last 4 digits of account number 6938			
			- -	
-	Column A on this page. Write that number here:	\$146,867.8	3	
	the dollar value totals from all pages.	\$146,867.8		

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Fill in this in	nformation to identify your cas	se:	21.01.63			
Debtor 1	Brian Joseph Raine					
DCDIOI 1	First Name	Middle Name	Last Name			
Debtor 2) First Name	Middle Neme	Lost Nama			
(Spouse if, filing)		Middle Name	Last Name			
United State	s Bankruptcy Court for the: E	EASTERN DISTRICT OF N	MISSOURI			
Case number	er				_	if this is an ed filing
Official E	orm 106E/F					
	e E/F: Creditors Who	o Have Unsecur	ed Claims			12/15
Be as complet any executory Schedule G: E Schedule D: C left. Attach the name and cas	te and accurate as possible. Use P contracts or unexpired leases that executory Contracts and Unexpired creditors Who Have Claims Secure a Continuation Page to this page. I e number (if known).	Part 1 for creditors with PRIC at could result in a claim. Al d Leases (Official Form 1060 d by Property. If more space of you have no information to	DRITY claims and Part 2 f lso list executory contrac G). Do not include any cre e is needed, copy the Par	cts on Schedule A/B: F editors with partially s rt you need, fill it out, i	roperty (Official For ecured claims that a number the entries in	m 106A/B) and on tre listed in the boxes on the
	ist All of Your PRIORITY Unse					
	reditors have priority unsecured control o to Part 2.	laims against you?				
Yes.	0 t0 Fait 2.					
2. List all of identify who possible,	f your priority unsecured claims. If hat type of claim it is. If a claim has b list the claims in alphabetical order a more than one creditor holds a partic	ooth priority and nonpriority am according to the creditor's nam	nounts, list that claim here a ie. If you have more than to	and show both priority a	nd nonpriority amoun	ts. As much as
(For an ex	xplanation of each type of claim, see	the instructions for this form in	n the instruction booklet.)	Total claim	Priority amount	Nonpriority amount
2.1 Inte	ernal Revenue Service	Last 4 digits of ac	count number	\$6,242.21	\$0.00	\$6,242.21
P.O	ity Creditor's Name D. Box 7346	When was the dek	ot incurred? 2009			
	ladelphia, PA 19101-7346 ber Street City State Zip Code	As of the date you	ı file, the claim is: Check	all that apply		
Who inc	curred the debt? Check one.	☐ Contingent				
☐ Debt	or 1 only	☐ Unliquidated				
☐ Debt	or 2 only	■ Disputed				
☐ Debt	or 1 and Debtor 2 only	•	unsecured claim:			
At le	ast one of the debtors and another	☐ Domestic suppo	ort obligations			
☐ Chec	ck if this claim is for a community	debt Taxes and certa	ain other debts you owe the	e government		
Is the cl	laim subject to offset?		h or personal injury while y	-		
■ No		☐ Other. Specify				
☐ Yes			Personal and Busi	ness Debt		
2.2 Inte	ernal Revenue Service	Last 4 digits of ac	count number	\$6,940.61	\$6,940.61	\$0.00
Prior	ity Creditor's Name			ΨΟ,Ο-ΨΟ.ΟΤ	Ψ0,540.01	Ψ0.00
	. Box 7346 ladelphia, PA 19101-7346	When was the del	ot incurred? 2010		-	
	ber Street City State Zip Code	As of the date you	ı file, the claim is: Check	all that apply		
Who inc	curred the debt? Check one.	☐ Contingent				
■ Debt	or 1 only	☐ Unliquidated				
☐ Debt	or 2 only	■ Disputed				
☐ Debt	or 1 and Debtor 2 only	Type of PRIORITY	unsecured claim:			
☐ At lea	ast one of the debtors and another	☐ Domestic suppo	ort obligations			
☐ Chec	ck if this claim is for a community	debt Taxes and certa	ain other debts you owe the	e government		
Is the cl	laim subject to offset?		h or personal injury while y	=		
■ No		☐ Other. Specify				
☐ Yes		. ,	Personal and Busi	ness		

Filed 03/25/22 Entered 03/25/22 10:27:22 Main Document Case 22-40822 Doc 1

Pg 22 of 63 Case number (if known) Debtor 1 Brian Joseph Raines 2.3 Last 4 digits of account number \$0.00 **Internal Revenue Service** \$19,465.03 \$19,465.03 Priority Creditor's Name P.O. Box 7346 When was the debt incurred? 2011 Philadelphia, PA 19101-7346

Who incurred the debt? Check one.	As of the date you file, the claim is: (heck all that apply						
<u> </u>	☐ Contingent							
■ Debtor 1 only	☐ Unliquidated							
Debtor 2 only	Disputed							
☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:							
☐ At least one of the debtors and another	☐ Domestic support obligations							
☐ Check if this claim is for a community debt Is the claim subject to offset?	■ Taxes and certain other debts you o □ Claims for death or personal injury w	-						
■ No	☐ Other. Specify							
Yes	Personal and	Business						
2.4 Internal Revenue Service Priority Creditor's Name	Last 4 digits of account number	\$13,904.05	\$13,904.05	\$0.00				
P.O. Box 7346 Philadelphia, PA 19101-7346	When was the debt incurred? 20	13						
Number Street City State Zip Code	As of the date you file, the claim is: 0	heck all that apply						
Who incurred the debt? Check one.	☐ Contingent							
Debtor 1 only	☐ Unliquidated							
Debtor 2 only	Disputed							
☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:							
\square At least one of the debtors and another	☐ Domestic support obligations							
☐ Check if this claim is for a community debt Is the claim subject to offset?	■ Taxes and certain other debts you o □ Claims for death or personal injury w	•						
■ No	☐ Other. Specify	•						
Yes	Personal and Business							
2.5 Internal Revenue Service	Last 4 digits of account number	\$26,275.48	\$26,275.48	\$0.00				
Priority Creditor's Name P.O. Box 7346 Philadelphia, PA 19101-7346	When was the debt incurred? 20	14						
Number Street City State Zip Code	As of the date you file, the claim is: C	heck all that apply						
Who incurred the debt? Check one.	☐ Contingent							
■ Debtor 1 only	☐ Unliquidated							
Debtor 2 only	■ Disputed							
☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:							
☐ At least one of the debtors and another	☐ Domestic support obligations							
☐ Check if this claim is for a community debt	t ■ Taxes and certain other debts you owe the government							
Is the claim subject to offset?	Claims for death or personal injury while you were intoxicated							
No	Other. Specify							
Yes	Personal and	Business						

Debtor 1 Brian Joseph Raines	Case number (if known)							
2.6 Internal Revenue Service	Last 4 digits of account number \$13,865.25	\$13,865.25	\$0.00					
Priority Creditor's Name								
P.O. Box 7346 Philadelphia, PA 19101-7346	When was the debt incurred? 2015							
Number Street City State Zip Code	t City State Zip Code As of the date you file, the claim is: Check all that apply							
Who incurred the debt? Check one.	☐ Contingent							
Debtor 1 only	☐ Unliquidated							
☐ Debtor 2 only	☐ Disputed							
☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:							
☐ At least one of the debtors and another	☐ Domestic support obligations							
☐ Check if this claim is for a community debt	■ Taxes and certain other debts you owe the government							
Is the claim subject to offset?	☐ Claims for death or personal injury while you were intoxicated							
No	Other. Specify							
☐ Yes	Personal and Business							
2.7 Internal Revenue Service	Last 4 digits of account number \$67,966.47	\$67,966.47	\$0.00					
Priority Creditor's Name			 					
P.O. Box 7346	When was the debt incurred? 2016							
Philadelphia, PA 19101-7346 Number Street City State Zip Code								
Who incurred the debt? Check one.	☐ Contingent							
Debtor 1 only	☐ Unliquidated							
Debtor 2 only	□ Debtor 2 only □ Disputed							
☐ Debtor 1 and Debtor 2 only								
☐ At least one of the debtors and another	☐ Domestic support obligations							
☐ Check if this claim is for a community debt	■ Taxes and certain other debts you owe the government							
Is the claim subject to offset?	☐ Claims for death or personal injury while you were intoxicated							
■ No	☐ Other. Specify							
☐ Yes	Personal and Business							
2.8 Internal Revenue Service	Last 4 digits of account number \$11,842.25	\$11,842.25	\$0.00					
Priority Creditor's Name	When we the debt in sure do 2017							
P.O. Box 7346 Philadelphia, PA 19101-7346	When was the debt incurred? 2017							
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply							
Who incurred the debt? Check one.	☐ Contingent							
Debtor 1 only	☐ Unliquidated							
Debtor 2 only	■ Disputed							
☐ Debtor 1 and Debtor 2 only	•							
☐ At least one of the debtors and another	☐ Domestic support obligations							
☐ Check if this claim is for a community debt	■ Taxes and certain other debts you owe the government							
Is the claim subject to offset?	☐ Claims for death or personal injury while you were intoxicated							
■ No	☐ Other. Specify							
Yes	Personal and Business							

Debtor 1 Brian Joseph Raines	Pg 24 01 03 C	ase number (if known)					
2.9 Internal Revenue Service	Last 4 digits of account number	\$7,727.20	\$7,727.20	\$0.00			
Priority Creditor's Name							
P.O. Box 7346	When was the debt incurred? 201	8					
Philadelphia, PA 19101-7346 Number Street City State Zip Code	As of the date you file, the claim is: C	neck all that apply					
Who incurred the debt? Check one.	☐ Contingent	, , , , , , , , , , , , , , , , , , , ,					
■ Debtor 1 only	☐ Unliquidated						
☐ Debtor 1 and Debtor 2 only	■ Disputed Type of PRIORITY unsecured claim:						
☐ At least one of the debtors and another	Domestic support obligations						
<u>_</u>	_						
☐ Check if this claim is for a community debt	Taxes and certain other debts you ov	-					
Is the claim subject to offset? No	Claims for death or personal injury w	nile you were intoxicated					
■ No □ Yes	Other. Specify						
Li res	Personal and E	Business					
2.1 Internal Revenue Service	Last 4 digits of account number	\$3,616.39	\$3,616.39	\$0.00			
Priority Creditor's Name							
P.O. Box 7346	When was the debt incurred? 201	7					
Philadelphia, PA 19101-7346 Number Street City State Zip Code	As of the date you file the claim is: C	nack all that annly					
Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply Contingent						
■ Debtor 1 only							
<u> </u>	☐ Unliquidated						
☐ Debtor 2 only	☐ Disputed						
Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim: ☐ Domestic support obligations						
At least one of the debtors and another							
☐ Check if this claim is for a community debt	Taxes and certain other debts you owe the government						
Is the claim subject to offset?	\square Claims for death or personal injury while you were intoxicated						
No	Other. Specify						
☐ Yes	1st Quarter Business Debt						
	Business Debi						
2.1 Internal Revenue Service	Last 4 digits of account number	\$10,605.43	\$10,605.43	\$0.00			
Priority Creditor's Name	W/						
P.O. Box 7346 Philadelphia, PA 19101-7346	When was the debt incurred? 201	11					
Number Street City State Zip Code	As of the date you file, the claim is: C	neck all that apply					
Who incurred the debt? Check one.	☐ Contingent						
■ Debtor 1 only Unliquidated							
Debtor 2 only	☐ Disputed						
☐ Debtor 1 and Debtor 2 only							
☐ At least one of the debtors and another	Type of PRIORITY unsecured claim: ☐ Domestic support obligations						
☐ Check if this claim is for a community debt	■ Taxes and certain other debts you ov	ve the government					
Is the claim subject to offset?	☐ Claims for death or personal injury w	-					
No	Other. Specify	mo you were intoxicated					
☐ Yes	2nd Quarter						
55	Business Debt						

Case 22-40822 Doc 1 Filed 03/25/22 Entered 03/25/22 10:27:22 Main Document Pg 25 of 63 Case number (if known)

Brian Joseph Raines	Case	number (if known)				
2.1 Internal Revenue Service	Last 4 digits of account number	\$9,605.42	\$9,605.42	\$0.00		
Priority Creditor's Name						
P.O. Box 7346	When was the debt incurred? 2017					
Philadelphia, PA 19101-7346 Number Street City State Zip Code	As of the date you file, the claim is: Check	all that apply				
Who incurred the debt? Check one.	☐ Contingent	an mar apply				
Debtor 1 only	☐ Unliquidated					
Debtor 2 only	☐ Disputed					
Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:					
<u> </u>	Domestic support obligations					
☐ At least one of the debtors and another	_					
☐ Check if this claim is for a community debt	Taxes and certain other debts you owe th	=				
Is the claim subject to offset? ■ No	☐ Claims for death or personal injury while y	ou were intoxicated				
■ No □ Yes	Other. Specify 3rd Quarter					
Li res	Business Debt					
2.1 Internal Revenue Service	Last 4 digits of account number	\$6,121.50	\$6,121.50	\$0.00		
Priority Creditor's Name	Last 4 digits of account number			******		
P.O. Box 7346	When was the debt incurred? 2017					
Philadelphia, PA 19101-7346 Number Street City State Zip Code	As of the date you file, the claim is: Check	all that annly				
Who incurred the debt? Check one.	☐ Contingent	ан шасарру				
■ Debtor 1 only	☐ Unliquidated					
_	·					
☐ Debtor 2 only	☐ Disputed					
Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:					
At least one of the debtors and another	☐ Domestic support obligations					
☐ Check if this claim is for a community debt	Taxes and certain other debts you owe the	=				
Is the claim subject to offset?	Claims for death or personal injury while y	ou were intoxicated				
■ No	Other. Specify					
☐ Yes	4th Quarter Business Debt					
2.1 Internal Revenue Service	Lock A divite of account number	\$535.26	\$535,26	\$0.00		
Priority Creditor's Name	Last 4 digits of account number			ΨΟΙΟΟ		
P.O. Box 7346	When was the debt incurred? 2018					
Philadelphia, PA 19101-7346 Number Street City State Zip Code	As of the date you file, the claim is: Check	all that apply				
Who incurred the debt? Check one.	Contingent	ан тат арріу				
■ Debtor 1 only	_					
☐ Debtor 2 only ☐ Disputed						
Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:					
At least one of the debtors and another	☐ At least one of the debtors and another ☐ Domestic support obligations					
☐ Check if this claim is for a community debt	Taxes and certain other debts you owe the	=				
Is the claim subject to offset?	Claims for death or personal injury while y	ou were intoxicated				
■ No	Other. Specify					
☐ Yes	4th Quarter Business Debt					

De	btor 1 Brian Joseph Raines	Case number (if know	n)	
2.1 5	Missouri Department of Revenue Priority Creditor's Name	Last 4 digits of account number	\$0.00 \$0.00	\$0.00
	Bankruptcy Unit P.O. Box 475 301 West High Street Jefferson City, MO 65105 Number Street City State Zip Code	When was the debt incurred?		
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply Contingent		
	■ Debtor 1 only	☐ Unliquidated		
	Debtor 2 only	☐ Disputed		
	Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:		
	☐ At least one of the debtors and another	☐ Domestic support obligations		
	☐ Check if this claim is for a community debt	■ Taxes and certain other debts you owe the government		
	Is the claim subject to offset?	☐ Claims for death or personal injury while you were intoxica	ted	
	■ No	☐ Other. Specify		
	Yes	Notice Only		
2.1 6	Missouri Divison of Employment Security Priority Creditor's Name PO BOX 59	Last 4 digits of account number 3000 \$11,40 When was the debt incurred? 2013 - 2020	96.65 \$0.00	\$11,406.65
	Jefferson City, MO 65104	When was the debt incurred? 2013 - 2020		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.	Contingent		
	Debtor 1 only	☐ Unliquidated		
	Debtor 2 only	Disputed		
	☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:		
	At least one of the debtors and another	☐ Domestic support obligations		
	☐ Check if this claim is for a community debt	Taxes and certain other debts you owe the government		
	Is the claim subject to offset?	☐ Claims for death or personal injury while you were intoxica	ted	
	Yes	Other. Specify Business Debt		
		Busiliess Debt		
Pa	rt 2: List All of Your NONPRIORITY Unsect	ured Claims		
3.	Do any creditors have nonpriority unsecured claim	ns against you?		
	☐ No. You have nothing to report in this part. Submit	this form to the court with your other schedules.		
	Yes.			
4.	unsecured claim, list the creditor separately for each of	e alphabetical order of the creditor who holds each claim. If a laim. For each claim listed, identify what type of claim it is. Do not reditors in Part 3.If you have more than three nonpriority unsec	t list claims already included in	Part 1. If more

Total claim

Part 2.

Case 22-40822 Doc 1 Filed 03/25/22 Entered 03/25/22 10:27:22 Main Document
Pg 27 of 63
Case number (if known)

Debto	Brian Joseph Raines	Case number (if known)	
4.1	Alphaeon Credit	Last 4 digits of account number 8558	\$5,570.00
	Nonpriority Creditor's Name PO BOX 6580965	When was the debt incurred?	
	Dallas, TX 75265 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical Credit Card	
4.2	Altus Receivables Management	Last 4 digits of account number 5703	\$1,002.98
	Nonpriority Creditor's Name 2400 Veterans Memorial Blvd., Ste.	When was the debt incurred?	
	300 Kenner, LA 70062 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim is. Oneck an that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Collections	
4.3	Capitol One	Last 4 digits of account number 3642	\$4,500.00
	Nonpriority Creditor's Name 1680 Capital One Dr	When was the debt incurred? 2021	
	McLean, VA 22102 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	■ Other. Specify Credit Card	

Case 22-40822 Doc 1 Filed 03/25/22 Entered 03/25/22 10:27:22 Main Document Pg 28 of 63 Case number (if known)

Deptor	Brian Joseph Raines	Case number (if known)	
4.4	Chase - Southwest	Last 4 digits of account number 1709	\$8,500.00
	Nonpriority Creditor's Name P.O. Box 6294	When was the debt incurred? 2021	
	Carol Stream, IL 60197 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	no or and date year may and order or or or order and appry	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit Card	
4.5	Christopher Olsem Miller	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name 120 S. Central Ave., Suite 700 Saint Louis, MO 63105	When was the debt incurred?	
	Number Street City State Zip Code As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Notice only	
4.6	Fundbox	Last 4 digits of account number	\$29,636.56
	Nonpriority Creditor's Name		
	6900 Dallas Parkway	When was the debt incurred? 8/2021	
	Plano, TX 75024 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
		☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset? report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts		
	■ No		
	☐ Yes		

Debt	or 1 Brian Joseph Raines	Case number (if known)	
4.7	Hilton American Express	Last 4 digits of account number	\$12,286.27
	Nonpriority Creditor's Name 200 Vesey Street New York City, NY 10285	When was the debt incurred? 2018	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit Card	
4.8	Hubble Law	Last 4 digits of account number 4081	\$4,195.00
	Nonpriority Creditor's Name 5353 South Lindbergh Blvd. Suite 210	When was the debt incurred?	
	St. Louis, MO 63126		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Attorney Fees	
4.9	Jay B. Umansky, Esq. Nonpriority Creditor's Name	Last 4 digits of account number	\$0.00
	12460 Olive Blvd., Ste. 118 Saint Louis, MO 63141	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only		☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset? report as priority claims		report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other, Specify Notice Only	

Jebt	Brian Joseph Raines	Case number (if known)	
l.1)	John and Donna Freese	Last 4 digits of account number	\$216,135.80
	Nonpriority Creditor's Name 315 Mississippi Ave.	When was the debt incurred?	
	Crystal City, MO 63019 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one. ☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	Unliquidated	
	☐ Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Business Debt/Suit to Pierce the Corporate	
1.1	Mark Thomas Bishop	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name		
	Court House Square P.O. Box 740	When was the debt incurred?	
	Hillsboro, MO 63050 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	7.6 of the date you may the drain lo. Officer an that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify Notice Only	
.1	Rachel Barnidge	Last 4 digits of account number	Unknown
	Nonpriority Creditor's Name 7025 Cornell Ave.	When was the debt incurred?	
	Saint Louis, MO 63130 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim is. Oneth an that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Business Debt/Litigation	

Case 22-40822 Doc 1 Filed 03/25/22 Entered 03/25/22 10:27:22 Main Document Pg 31 of 63 Case number (if known)

Regions Bank Nonpriority Creditor's Name	Last 4 digits of account number 3717	\$2,000.00		
180 Richardson Crossing Arnold, MO 63010	When was the debt incurred?			
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
Who incurred the debt? Check one.				
Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
Debtor 1 and Debtor 2 only	□ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
☐ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts			
Yes	■ Other. Specify NSF due to garnishment			
Small Business Administration	Last 4 digits of account number 6937	\$149,900.00		
Nonpriority Creditor's Name 14925 Kingsport Rd	When was the debt incurred? 01/1/2020			
Fort Worth, TX 76155				
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
Who incurred the debt? Check one.	_			
Debtor 1 only	Contingent			
Debtor 2 only	☐ Unliquidated			
Debtor 1 and Debtor 2 only	☐ Disputed			
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
☐ Check if this claim is for a community	Student loans			
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
■ No	\square Debts to pension or profit-sharing plans, and other similar debts			
□ Yes	■ Other. Specify Small Business Loans when COVID hit			
SRS Distributions	Last 4 digits of account number 9179	\$44,313.04		
Nonpriority Creditor's Name	Last 7 digits of account number 2110	Ψ		
12460 Olive Blvd. St. Louis, MO 63141	When was the debt incurred? 2019			
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
Who incurred the debt? Check one.				
■ Debtor 1 only	☐ Contingent			
☐ Debtor 2 only	☐ Unliquidated			
☐ Debtor 1 and Debtor 2 only	Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
☐ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts			
	Business Debt			
П	Supplier that got bought out and they sued			
☐ Yes	Other Specify Debtor for remaining balance			

Debtor 1 Brian Joseph Raines Pg 32 of 63 Case number (if known)

STL Programs	Last 4 digits of account number 7634	\$1,423
Nonpriority Creditor's Name PO Box 20586	When was the debt incurred?	
St. Louis, MO 63139 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Business Ad Debt	
Nonpriority Creditor's Name 903 S. Lindbergh St. Louis, MO 63131 Number Street City State Zip Code	When was the debt incurred? As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	_	
Debtor 1 only	Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	☐ Debts to pension or profit-sharing plans, and other similar debts	
■ No	Debts to pension or profit-straining plans, and other similar debts	

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
Total claims	6a.	Domestic support obligations	6a.	\$ 0.00
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 216,119.20
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 216,119.20
				Total Claim
Total claims	6f.	Student loans	6f.	\$ 0.00
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00

Debtor 1 Brian Joseph Raines

Pg 33 of 63 Case number (if known)

- Other. Add all other nonpriority unsecured claims. Write that amount here.
 - . Total Nonpriority. Add lines 6f through 6i.

6i. \$ **496,254.93**

6j. \$ **496,254.93**

Fill in this infor	mation to identify your	case:		
Debtor 1	Brian Joseph Rai	ines		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F MISSOURI	
Case number				
(if known)				☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1 Kevin Smith 807 Eleonore Stret New Orleans, LA 70115	This is my current lease for working down in New Orleans.

		· ·	Pa 35 of 63	
Fill in th	his information to identify yo			
Debtor '	1 Brian Joseph F	Raines		
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if.		Middle Name	Last Name	
(Spouse II,	, illing) First Name	Middle Name	Lastivame	
United S	States Bankruptcy Court for the	e: EASTERN DISTRICT O	F MISSOURI	
Case nu	umber			
(if known)				☐ Check if this is an
				amended filing
∩ffi⊲i	ial Form 106H			
		dalitana		
Sche	edule H: Your Co	deptors		12/15
eople a	are filing together, both are e	qually responsible for supp he boxes on the left. Attach	olying correct information. If ron the Additional Page to this p	plete and accurate as possible. If two married more space is needed, copy the Additional Page, page. On the top of any Additional Pages, write
1. 0	o you have any codebtors?	(If you are filing a joint case,	do not list either spouse as a co	odebtor.
	٧o			
■ Y	′es			
			operty state or territory? (Colerto Rico, Texas, Washington,	mmunity property states and territories include and Wisconsin.)
_				,
	No. Go to line 3.			
	es. Did your spouse, former sp	pouse, or legal equivalent live	e with you at the time?	
in li For	ine 2 again as a codebtor onl	ly if that person is a guaran	tor or cosigner. Make sure yo	r spouse is filing with you. List the person shown ou have listed the creditor on Schedule D (Official se Schedule D, Schedule E/F, or Schedule G to fil
	Column 1: Your codebtor Name, Number, Street, City, State and	d ZIP Code		column 2: The creditor to whom you owe the debt neck all schedules that apply:
3.1	B. Raines & Associates	Inc	п	Schedule D, line
0.1	7733 Forsyth Blvd., 11tl			Schedule E/F, line 2.1
	Saint Louis, MO 63105			Schedule G
				ternal Revenue Service
3.2	B. Raines & Associates			Schedule D, line2.3
	7733 Forsyth Blvd., 11tl Saint Louis, MO 63105	n Floor		Schedule E/F, line
				Schedule G
			Gr	and Vacations Services, LLC
3.3	B. Raines & Associates			Schedule D, line
	7733 Forsyth Blvd., 11tl	n Floor		Schedule E/F, line4.14
	Saint Louis, MO 63105			Schedule G
			Sr	nall Business Administration

Fill	in this information to identify	vour case:											
		Joseph Raines											
	otor 2				_								
Uni	ted States Bankruptcy Court	for the: EASTERN DISTRIC	T OF MISSOURI										
Case number (If known)							Check if this is: An amended filing A supplement showing postpetition chapter 13 income as of the following date:						
0	fficial Form 106l					Ī	// MM / DD/ Y	YYYY					
S	chedule I: Your	Income								12/15			
spo atta	use. If you are separated an	If you are married and not fil nd your spouse is not filing v form. On the top of any addi ment	vith you, do not inclu	ide infor	mati	on abou	t your spoumber (if	ouse. If m known). <i>A</i>	ore space is	needed,			
	If you have more than one job, attach a separate page with information about additional employers.	oh	■ Employed	■ Employed			☐ Employed						
		Employment status	☐ Not employed	_				☐ Not employed					
		Occupation	Claims Special	ist									
	Include part-time, seasonal, self-employed work.	, or Employer's name	CMR										
	Occupation may include stu or homemaker, if it applies.	ident Employer's address		1409 Kuebel St Harahan, LA 70123									
		How long employed	there? 0 Years	s, 5 Moi	nths	<u> </u>	_						
Par	t 2: Give Details Abou	ut Monthly Income											
	mate monthly income as of use unless you are separated	the date you file this form.	f you have nothing to r	eport for	any	line, write	e \$0 in the	space. In	clude your no	n-filing			
	u or your non-filing spouse ha e space, attach a separate sh	ave more than one employer, oneet to this form.	combine the informatio	n for all	empl	oyers for	that perso	on on the li	ines below. If	you need			
						For De	btor 1		btor 2 or ing spouse				
2.		s, salary, and commissions (nthly, calculate what the month		2.	\$	10	,000.00	\$	N/A				
3.	Estimate and list monthly	overtime pay.		3.	+\$		0.00	+\$	N/A				
4.	Calculate gross Income.	Add line 2 + line 3.		4.	\$	10,0	00.00	\$	N/A				

Official Form 106l Schedule I: Your Income page 1

Case 22-40822 Doc 1 Filed 03/25/22 Entered 03/25/22 10:27:22 Main Document Pg 37 of 63

Deb	tor 1	Brian Joseph Raines	-	C	Case r	number (if kno	vn)				
						Debtor 1		non	Debtor 2 -filing sp	ouse	
	Сор	y line 4 here	4.		\$	10,000.	00	\$		N/	<u>A</u>
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a.		\$	0.0	00	\$		N/	Α
	5b.	Mandatory contributions for retirement plans	5b.		\$	0.0	00	\$		N/	
	5c.	Voluntary contributions for retirement plans	5c.		\$		00	\$		N/	
	5d.	Required repayments of retirement fund loans	5d.		\$		00	\$		N/	
	5e.	Insurance	5e.		\$ \$		00	\$_		N/	
	5f. 5g.	Domestic support obligations Union dues	5f. 5g.		\$ _		00	\$_ \$		N/	
	5h.	Other deductions. Specify:	5h.		\$ —			+ \$ [—]		N/	
6			_		\$			· -		N/	
6. 7.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. culate total monthly take-home pay. Subtract line 6 from line 4.	6. 7.		φ — \$	10.000		\$ \$			
		• • • • • • • • • • • • • • • • • • • •	7.		Φ	10,000.	<u> </u>	Φ_		N/	<u>A</u> _
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total									
		monthly net income.	8a.		\$	0.0	00	\$		N/	Α
	8b.	Interest and dividends	8b.		\$	0.0	00	\$		N/	A
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.		\$	0.	00	\$		N/	_
	8d.	Unemployment compensation	8d.		\$ 		00 00	\$		N/	
	8e.	Social Security	8e.		\$ —		00	\$-		N/	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.		\$	0.	00	\$		N/	A
	8g.	Pension or retirement income	8g.		\$	0.	00	\$		N/	A
	8h.	Other monthly income. Specify:	_ 8h.	.+	\$	0.	00	+ \$		N/	<u>A</u>
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$.	0.	00	\$		N	I/A
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_	10	,000.00	\$_		N/A	= \$	10,000.00
11.	Stat Inclu	te all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your friends or relatives. In the contribution of the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your per friends or relatives.	depe			•			Schedule 11.		0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies							12.	\$	10,000.00
13.	Do y	you expect an increase or decrease within the year after you file this form No.	?								oined hly income
		Yes. Explain: I am a 1099 salesman currently working for CMR schedule or payroll deduction as I am paid as a 1			ructi	on in New	Or	leans	. I do n	ot ha	ave a pay

Official Form 106l Schedule I: Your Income page 2

Case 22-40822 Doc 1 Filed 03/25/22 Entered 03/25/22 10:27:22 Main Document Pg 38 of 63

Fill	in this informa	tion to identify yo	ur case:						
Deb	tor 1	Brian Joseph	Raines			Che	eck if this is:		
505		Briaii 303epii	i italiies				An amended filing		
Deb	tor 2						•	ving postpetition chapte	r
(Spc	ouse, if filing)	-				_	13 expenses as of	01 1	
Unite	ed States Bankr	ruptcy Court for the:	EASTE	RN DISTRICT OF MISSO	URI		MM / DD / YYYY		
Case	e number								
(If kr	nown)								
Of	fficial Fo	rm 106J							
Sc	chedule	J: Your E	Exper	ises				12	/15
Be a	as complete a	and accurate as	possible. eded, atta	If two married people ar ch another sheet to this					
Part	t 1: Descr	ibe Your Housel	hold						
1.	Is this a joir	nt case?							
	■ No. Go to	line 2.							
	☐ Yes. Doe	s Debtor 2 live in	n a separ	ate household?					
	□ N		•						
			t file Offici	al Form 106J-2, Expenses	s for Senarate House	hold of Del	ntor 2		
		es. Debioi 2 ilius	t ille Ollici	air oilli 1005-2, <i>Expenses</i>	s for Separate Flouse	inola of Del	Jioi 2.		
2.	Do you have	e dependents?	☐ No						
	Do not list Debtor 2.	ebtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?	
	Da mat atata	41						□ No	
	Do not state dependents				Daughter		2	■ Yes	
	асрепастко	namos.					_ _	☐ No	
					Son		5	_	
								■ Yes	
								□ No □ Yes	
								□ No	
3.	Do your eyr	enses include	_					☐ Yes	
J.		f people other th	an 💻	No					
		d your depender		Yes					
	- 4			_					
Pari		ate Your Ongoin		y Expenses uptcy filing date unless y	ou are using this fo	orm as a s	unnlement in a Cha	inter 13 case to report	
exp				y is filed. If this is a supp					
Incl	lude expense	s paid for with n	on-cash	government assistance i	f you know				
			l have inc	luded it on Schedule I: \	Your Income		Vaurava		
(Ott	ficial Form 10	61.)					Your expe	elises	
4	The rental a	u hama awaa	in avnan	aaa fan wasin maaidanaa I		_			
4.		nd any rent for the		ses for your residence. I	nclude first mortgage	e 4.	\$	5,089.00	
		led in line 4:	grama						
						,	Φ	0.00	
		estate taxes	or rente-	'a inqurance		4a.		0.00	
	•	rty, homeowner's maintenance, rep	-			4b. 4c.	: 	250.00	
		owner's associati				4c. 4d.	: 	0.00 600.00	
5.				our residence, such as ho	me equity loans	4u. 5.	·	0.00	
					29, 100110	٠.	*	3.00	

Case 22-40822 Doc 1 Filed 03/25/22 Entered 03/25/22 10:27:22 Main Document Pg 39 of 63

Debtor 1 Brian Joseph Raines	Case number (if known)	
6. Utilities:		
6a. Electricity, heat, natural gas	6a. \$	315.00
6b. Water, sewer, garbage collection	6b. \$	175.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$	380.00
6d. Other. Specify: Timeshare Maintenance	6d. \$	3,797.31
· · · · · · · · · · · · · · · · · · ·	·	
2	7. \$	550.00
Childcare and children's education costs	8. \$	2,174.00
Clothing, laundry, and dry cleaning	9. \$	0.00
). Personal care products and services	10. \$	150.00
. Medical and dental expenses	11. \$	0.00
Transportation. Include gas, maintenance, bus or train fare.	12. \$	650.00
Do not include car payments.	· <u> </u>	
3. Entertainment, clubs, recreation, newspapers, magazines, and books	13. \$	0.00
Charitable contributions and religious donations	14. \$	0.00
 Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 		
15a. Life insurance	15a. \$	165.00
15b. Health insurance	15a. \$	
	· · · · · · · · · · · · · · · · · · ·	250.00
15c. Vehicle insurance	15c. \$	212.00
15d. Other insurance. Specify:	15d. \$	0.00
5. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20		
Specify:	16. \$	0.00
7. Installment or lease payments: 17a. Car payments for Vehicle 1	17a. \$	4 000 00
• •		1,029.00
17b. Car payments for Vehicle 2	17b. \$	787.00
17c. Other. Specify:	17c. \$	0.00
17d. Other. Specify:	17d. \$	0.00
 Your payments of alimony, maintenance, and support that you did not rep deducted from your pay on line 5, Schedule I, Your Income (Official Form 		0.00
Other payments you make to support others who do not live with you.	\$	0.00
Specify:	19.	
Other real property expenses not included in lines 4 or 5 of this form or o		
20a. Mortgages on other property	20a. \$	0.00
20b. Real estate taxes	20b. \$	0.00
20c. Property, homeowner's, or renter's insurance	20c. \$	0.00
20d. Maintenance, repair, and upkeep expenses	20d. \$	0.00
20e. Homeowner's association or condominium dues	20e. \$	0.00
	·	
. Other: Specify:	21. +\$	0.00
2. Calculate your monthly expenses		
22a. Add lines 4 through 21.	\$	16,573.31
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 10	06J-2 \$	•
22c. Add line 22a and 22b. The result is your monthly expenses.	\$	16,573.31
	<u> </u>	. 5,0.0.01
3. Calculate your monthly net income.		
23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	10,000.00
23b. Copy your monthly expenses from line 22c above.	23b\$	16,573.31
One Continue to the second management of the second		
23c. Subtract your monthly expenses from your monthly income.	23c. \$	-6,573.31
The result is your <i>monthly net income</i> .	200. μΨ	3,3.3.01
4. Do you expect an increase or decrease in your expenses within the year a For example, do you expect to finish paying for your car loan within the year or do you expect.		ase or decrease because
modification to the terms of your mortgage?	5 5 5 7 1 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
■ No.		
□ Ves Explain here:		

Case 22-40822 Doc 1 Filed 03/25/22 Entered 03/25/22 10:27:22 Main Document Pg 40 of 63

Fill in this information to identif	y your case:		
Debtor 1 Brian Jose First Name	ph Raines Middle Name	Last Name	
Debtor 2	Wilddle Name	Last Name	
(Spouse if, filing) First Name	Middle Name	Last Name	
United States Bankruptcy Court for	or the: EASTERN DISTRICT C)F MISSOURI	
Case number			
(if known)			☐ Check if this is an amended filing
If two married people are filing to You must file this form wheneve obtaining money or property by years, or both. 18 U.S.C. §§ 152,	ogether, both are equally respo er you file bankruptcy schedules fraud in connection with a banl		
Sign Below			
Did you pay or agree to pa	y someone who is NOT an attor	rney to help you fill out bankruptcy fo	orms?
■ No			
110			
Yes. Name of person			ach Bankruptcy Petition Preparer's Notice, claration, and Signature (Official Form 119)
Yes. Name of person			claration, and Signature (Official Form 119)
Yes. Name of person Under penalty of perjury, I central they are true and corre	ct.	Dec	claration, and Signature (Official Form 119)
Yes. Name of personUnder penalty of perjury, I of	nes	Dec	claration, and Signature (Official Form 119)

Case 22-40822 Doc 1 Filed 03/25/22 Entered 03/25/22 10:27:22 Main Document Pg 41 of 63

-#	ll in this inform	mation to identify you	r. c.s.c.:							
	ebtor 1									
	DIOI I	Brian Joseph Ra First Name	Middle Name	Last Name						
1 '	ebtor 2 ouse if, filing)	First Name	Middle Name	Last Name						
``										
Ur	nited States Ba	nkruptcy Court for the:	EASTERN DISTRICT OF	MISSOURI						
	ase number _ known)				_	Check if this is an amended filing				
	fficial Fo		Affairs for Individ	duals Filing for B	ankruptcy	4/19				
info	ormation. If m	nore space is needed, n). Answer every que	ble. If two married people a attach a separate sheet to stion. arital Status and Where You	this form. On the top of an						
1.		r current marital statu								
	■ Married □ Not ma									
2.	During the I	ast 3 years, have you	lived anywhere other than v	where you live now?						
	□ No									
	Yes. Lis	st all of the places you l	ived in the last 3 years. Do no	ot include where you live now	I.					
	Debtor 1 Pr	rior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ac	ldress:	Dates Debtor 2 lived there				
	275 Lingo Arnold, M	nberry Lane O 63010	From-To: 4/2016 - 5/201 9	☐ Same as Debtor	1	☐ Same as Debtor 1 From-To:				
	■ No □ Yes. Ma	<i>ies</i> include Arizona, Ca	ver live with a spouse or leg lifornia, Idaho, Louisiana, Nev medule H: Your Codebtors (Of	vada, New Mexico, Puerto R						
4.	Did you hav	e any income from er	nployment or from operatin u received from all jobs and a			ndar years?				
			have income that you receive							
	□ No ■ Yes. Fil	I in the details.								
			Debtor 1		Debtor 2					
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)				
		of current year untiled for bankruptcy:	■ Wages, commissions, bonuses, tips	\$10,000.00	☐ Wages, commissions, bonuses, tips					
			☐ Operating a business		☐ Operating a business					

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Case 22-40822 Doc 1 Filed 03/25/22 Entered 03/25/22 10:27:22 Main Document

Debtor 1 Brian Joseph Raines Pg 42 of 63 Case number (if known)

	Debtor 1			Debtor 2		
		of income I that apply.	Gross income (before deductions and exclusions)	Sources of inco		Gross income (before deductions and exclusions)
For last calendar year: January 1 to December 31, 20	■ Wage bonuses,	s, commissions, tips	\$26,006.46	☐ Wages, common bonuses, tips	nissions,	
	☐ Opera	ating a business		☐ Operating a b	usiness	
For the calendar year before to January 1 to December 31, 20		es, commissions,	\$89,348.91	☐ Wages, common bonuses, tips	nissions,	
	☐ Opera	ating a business		☐ Operating a b	usiness	
□ No■ Yes. Fill in the details.	Debtor 1 Sources	of income	Gross income from	Debtor 2 Sources of inco	ome	Gross income
			Gross income from each source		ome	Gross income (before deductions
			(before deductions and exclusions)			and exclusions)
or last calendar year: January 1 to December 31, 20	VA Disa	bility	\$3,000.00			
individual primar During the 90 da No. Go t	ebtor 2's debts pi 1 nor Debtor 2 ha ily for a personal, ays before you filed to line 7.	rimarily consumer as primarily consu family, or househol d for bankruptcy, die	debts?	al of \$6,825* or more	e?	,
paid not i	that creditor. Do r	not include paymen to an attorney for th	ts for domestic support obliquis bankruptcy case.	gations, such as chil	d support ar	nd alimony. Also, do
☐ Yes. Debtor 1 or Deb During the 90 da			mer debts. d you pay any creditor a tota	al of \$600 or more?		
	o line 7.					
inclu		domestic support of	d a total of \$600 or more an oligations, such as child sup			
Creditor's Name and Add	ress	Dates of payme	nt Total amount	Amount you still owe	Was this p	ayment for

Case 22-40822 Doc 1 Filed 03/25/22 Entered 03/25/22 10:27:22 Main Document

Debtor 1 Brian Joseph Raines Pg 43 of 63 Case number (if known)

	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for
	Grand Vacations Services, LLC Sunrise Park City LLC 6355 Metrowest Blvd. Orlando, FL 32835		\$850.00	\$17,859.00	■ Mortgage □ Car □ Credit Card □ Loan Repayment □ Suppliers or vendors □ Other
	Grand Vacations Services, LLC Grand Islander Trust 6355 Metrowest Blvd. Orlando, FL 32835		\$1,502.00	\$38,261.00	■ Mortgage □ Car □ Credit Card □ Loan Repayment □ Suppliers or vendors □ Other
7.	Within 1 year before you filed for bankruptous Insiders include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony. No Yes. List all payments to an insider.	ortners; relatives of any ger control, or owner of 20% of	neral partners; partners or more of their voting	erships of which yo g securities; and a	ou are a general partner; corporations ny managing agent, including one fo
	Insider's Name and Address	Dates of payment	Total amount	Amount you	Reason for this payment
	moraor o riamo ana riaaroos	Datos of paymont	paid	still owe	nousem for time paymont
8.	Within 1 year before you filed for bankruptoinsider? Include payments on debts guaranteed or cos No Yes. List all payments to an insider Insider's Name and Address		Total amount	Amount you	Reason for this payment
	insider 5 Name and Address	Dates of payment	paid	still owe	Include creditor's name
Par	t 4: Identify Legal Actions, Repossession	s, and Foreclosures			
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details.	cy, were you a party in ar			
	Case title Case number	Nature of the case	Court or agency		Status of the case
	John Freese et al. v. Brian Raines et al. 21JE-CC00702	Other Miscellaneous Actions	Jefferson Cour Court 300 Main St. Hillsboro, MO		■ Pending □ On appeal □ Concluded
	SRS Distribution Inc. v. B. Raines & Associates et al 1922-CC00441	Breach of Contract	St. Louis City (10 North Tucke Saint Louis, Mo	er Blvd.	■ Pending □ On appeal □ Concluded

Case 22-40822 Doc 1 Filed 03/25/22 Entered 03/25/22 10:27:22 Main Document Pg 44 of 63

Debtor 1 Brian Joseph Raines

Case number (if known)

Case title Case number		Nature of the case Court or agency		Status of the case	
	Rachel Barnidge v. B. Raines & Associates Inc. et al. 2122-CC00528	Other tort	St. Louis City Circuit Cou 10 North Tucker Blvd. Saint Louis, MO 63101	Pendin ☐ On app ☐ Conclu	eal
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below.		rty repossessed, foreclosed, (garnished, attache	ed, seized, or levied?
	Creditor Name and Address	Describe the Property		Date	Value of the property
		Explain what happened		40/00/0004	40.00
	SRS Distribution Inc. c/o Jay B. Umansky 12460 Olive Blvd., Ste. 118 Saint Louis, MO 63141	□ Property was reposses □ Property was forecloses □ Property was garnishes	ed.	12/29/2021 \$6	
		☐ Property was attached	d, seized or levied.		
12.	■ No □ Yes. Fill in the details. Creditor Name and Address Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a No			Date action was taken signee for the ber	Amount nefit of creditors, a
	☐ Yes				
Par	t 5: List Certain Gifts and Contributions				
13.	Within 2 years before you filed for bankrup ■ No □ Yes. Fill in the details for each gift.	tcy, did you give any gifts	s with a total value of more tha	ın \$600 per persoı	n?
	Gifts with a total value of more than \$600 per person	Describe the gifts		Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:				
14.	Within 2 years before you filed for bankrup ■ No □ Yes. Fill in the details for each gift or con		s or contributions with a total v	value of more than	n \$600 to any charity?
	Gifts or contributions to charities that tot more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)		contributed	Dates you contributed	Value

Filed 03/25/22 Entered 03/25/22 10:27:22 Case 22-40822 Doc 1 Main Document

Pg 45 of 63 Case number (if known) Debtor 1 Brian Joseph Raines Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No п Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of **Address** transferred or transfer was payment Email or website address made Person Who Made the Payment, if Not You **Robert Faerber** \$750.00 **Robert Faerber Law Offices** 230 S. Bemiston Ave., #600 St. Louis, MO 63105 \$5,000.00 Carmody MacDonald P.C. **Attorney Fees** 1/22 120 S. Central Ave., Suite 1800 Saint Louis, MO 63105 ree@carmodymacdonald.com 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes. Fill in the details. Person Who Was Paid Description and value of any property Amount of Date payment Address transferred or transfer was payment made 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. Yes. Fill in the details.

Wife

Address

Jane Sherman

2505 Wild Fire Ct

Arnold, MO 63010

Bronco for Wedding Present

Description and value of

property transferred

Describe any property or

paid in exchange

1979 Ford Bronco |

Value: \$1,500.00

payments received or debts

Person Who Received Transfer

Person's relationship to you

Date transfer was

made

11/1/2019

Case 22-40822 Doc 1 Filed 03/25/22 Entered 03/25/22 10:27:22 Main Document

Pg 46 of 63 Case number (if known) Debtor 1 Brian Joseph Raines 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) ☐ Yes. Fill in the details. Name of trust Description and value of the property transferred **Date Transfer was** made Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. Name of Financial Institution and Last 4 digits of Type of account or Date account was Last balance account number instrument closed, sold. before closing or Address (Number, Street, City, State and ZIP Code) moved, or transfer transferred XXXX-3717 \$2,500.00 Regions ☐ Checking 12/1/2021 180 Richardson Crossing □ Savings **Arnold, MO 63010** ■ Money Market □ Brokerage □ Other 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Describe the contents Do you still Who else had access to it? Address (Number, Street, City, Address (Number, Street, City, State and ZIP Code) have it? State and ZIP Code) 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? No Yes. Fill in the details. Name of Storage Facility Who else has or had access Describe the contents Do you still to it? have it? Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

No

Yes. Fill in the details.

Owner's Name Address (Number, Street, City, State and ZIP Code) Where is the property? (Number, Street, City, State and ZIP Describe the property

Value

Case 22-40822 Doc 1 Filed 03/25/22 Entered 03/25/22 10:27:22 Main Document Pg 47 of 63

Debtor 1 Brian Joseph Raines

Case number (if known)

Part 10:	Give Details About Environmental Information
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For the purpose of Part 10, the following definitions apply:

- Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

	hazardous material, pollutant, contaminant, or similar term.										
Rep	port all notices, releases, and proceedings th	at you know about, regardless of when	they occurred.								
24.	Has any governmental unit notified you tha	nt you may be liable or potentially liable	under or in violation of an environm	ental law?							
	■ No □ Yes. Fill in the details.										
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice							
25.	Have you notified any governmental unit of	Have you notified any governmental unit of any release of hazardous material?									
	■ No □ Yes. Fill in the details.										
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice							
26.	Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.										
	■ No □ Yes. Fill in the details.										
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case							
Pa	rt 11: Give Details About Your Business or	Connections to Any Business									
27.	Within 4 years before you filed for bankrup	tcy, did you own a business or have an	y of the following connections to an	y business?							
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time										
	☐ A member of a limited liability comp	pany (LLC) or limited liability partnershi	p (LLP)								
	☐ A partner in a partnership										
	☐ An officer, director, or managing ex	ecutive of a corporation									
	☐ An owner of at least 5% of the votin	ng or equity securities of a corporation									
	☐ No. None of the above applies. Go to	Part 12.									
	Yes. Check all that apply above and fil	I in the details below for each business									
	Business Name	Describe the nature of the business	Employer Identification number								
	Address (Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not include Social Security Dates business existed	number or IIIN.							
	B. Raines & Associates Inc	General Construction, Roofing	EIN: 20-4013478								
	231 S. Bemiston Clayton, MO 63105	Thousand CPA, Nicole Thousand	From-To 12/2005 to presen	t							

Case 22-40822 Doc 1 Filed 03/25/22 Entered 03/25/22 10:27:22 Main Document

Pg 48 of 63

Case number (if known)

28.	Within 2 years before you filed for bankrup institutions, creditors, or other parties.	tcy, did you give a financial statement to	anyone about your business? Include all financial
	■ No □ Yes. Fill in the details below.		
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued	
Pai	rt 12: Sign Below		
are with 18 U		a false statement, concealing property, or	I declare under penalty of perjury that the answers obtaining money or property by fraud in connection ears, or both.
Da	te _March 25, 2022	Date	
Did	∕es you pay or agree to pay someone who is no No	ot an attorney to help you fill out bankrupt	cy forms?
ПΙ	es. Name of Person Attach the Bankr	uptcy Petition Preparer's Notice, Declaration,	and Signature (Official Form 119).

Case 22-40822 Doc 1 Filed 03/25/22 Entered 03/25/22 10:27:22 Main Document Pg 49 of 63

Fill in this inform	nation to identify your	case:		
Debtor 1	Brian Joseph Rai	nes		
Dahtan 0	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court for the:	EASTERN DISTF	RICT OF MISSOURI	
Case number				
(if known)				☐ Check if this is an
				amended filing
Official Fo	rm 108			
Statemen	nt of Intentio	n for Indiv	∕iduals Filing Under Chapt	er 7 12/15
	vidual filing under cha	-	ll out this form if:	
	claims secured by yo	• • •	and a second and	
	ed personal property a s form with the court w		oot expired. You file your bankruptcy petition or by the date s	et for the meeting of creditors.
	ver is earlier, unless th		e time for cause. You must also send copies to t	
	ople are filing together d date the form.	in a joint case, bo	oth are equally responsible for supplying correct	nformation. Both debtors must
Bo as complete a	nd accurate as nessib	lo If more space i	s needed, attach a separate sheet to this form. Or	the ten of any additional pages
	our name and case num		s needed, attach a separate sheet to this form. Of	i the top of any additional pages,
Part 1: List Yo	our Creditors Who Have	a Sacurad Claims		
 For any credito information be 		ert 1 of Schedule D	D: Creditors Who Have Claims Secured by Proper	ty (Official Form 106D), fill in the
Identify the cre	ditor and the property the	nat is collateral	What do you intend to do with the property that secures a debt?	t Did you claim the property as exempt on Schedule C?
			secures a dept:	as exempt on schedule of
One distante			_	_
Creditor's Fo	ord Motor Credit		☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
			Retain the property and redeem it. Retain the property and enter into a	■ Yes
Description of		109 miles	Reaffirmation Agreement.	
property	Vehicle:		☐ Retain the property and [explain]:	
securing debt:				<u> </u>
	ord Motor Credit		☐ Surrender the property.	■ No
name:			Retain the property and redeem it.	☐ Yes
Description of	2021 Ford Edge 94	miles	Retain the property and enter into a Reaffirmation Agreement.	Li Tes
property			☐ Retain the property and [explain]:	
securing debt:				
	rand Vacations Serv	ices, LLC	☐ Surrender the property.	■ No
name:			Retain the property and redeem it.	□Yes
Description of	Grand Vacations S		Retain the property and enter into a Reaffirmation Agreement.	□ 162
	Sunrise Park City, Metrowest Blvd. O		3	

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

Case 22-40822 Doc 1 Filed 03/25/22 Entered 03/25/22 10:27:22 Main Document Pg 50 of 63

Debtor 1 E	Brian Joseph Raines	Case number (if known	
property securing o	32835 Orange County Hebt: Timeshare: Hilton Timeshare	☐ Retain the property and [explain]:	
Creditor's name:	The Grand Islander Waikiki Honolulu	☐ Surrender the property. ☐ Retain the property and redeem it.	■ No □ Yes
Description property securing of	Honolulu 6355 Metrowest Blvd.	■ Retain the property and enter into a Reaffirmation Agreement.□ Retain the property and [explain]:	
For any une n the inform	ation below. Do not list real estate leases. U	d in Schedule G: Executory Contracts and Unexpire despired leases are leases that are still in effect; the f the trustee does not assume it. 11 U.S.C. § 365(p)	e lease period has not yet ended.
Describe yo	our unexpired personal property leases		Will the lease be assumed?
Lessor's nan			□ No
Description of Property:	of leased		☐ Yes
Lessor's nan			□ No
Description of Property:	of leased		☐ Yes
Lessor's nan			□ No
Description of Property:	of leased		☐ Yes
Lessor's nan			□ No
Description of Property:	or reased		☐ Yes
Lessor's nan	·······		□ No
Description of Property:	of leased		☐ Yes
Lessor's nan			□ No
Description of Property:	or leased		☐ Yes
Lessor's nan			□ No
Description of Property:	of leased		☐ Yes
Part 3: Si	gn Below		
	ty of perjury, I declare that I have indicated n t is subject to an unexpired lease.	ny intention about any property of my estate that se	ecures a debt and any personal
X /s/ Bria	an Joseph Raines	X	
	Joseph Raines ire of Debtor 1	Signature of Debtor 2	

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

Case 22-40822 Doc 1 Filed 03/25/22 Entered 03/25/22 10:27:22 Main Document Pg 51 of 63

Debtor 1	Debtor 1 Brian Joseph Raines		Case number (if known)	
Date	March 25, 2022	Date		

Case 22-40822 Doc 1 Filed 03/25/22 Entered 03/25/22 10:27:22 Main Document Pg 52 of 63

Fill in thi	s information to identify your case:	Ch	eck one box only as di	rected in this form and	in Form
Debtor 1	Brian Joseph Raines	122	2A-1Supp:		
Debtor 2 (Spouse, if			1. There is no presu	umption of abuse	
' '	tates Bankruptcy Court for the: _Eastern District of	Missouri I	applies will be m	o determine if a presur	•
Case nu	mber			cial Form 122A-2).	_
(ii kilowii)				does not apply now be service but it could ap	
			☐ Check if this is a	n amended filing	
	al Form 122A - 1				
Chap	ter 7 Statement of Your Cur	rent Monthly Inc	ome		04/20
attach a s case num	plete and accurate as possible. If two married people a eparate sheet to this form. Include the line number to who will be for the line number to who will be for the line of the line number to who will be for the line of t	nich the additional information a n a presumption of abuse becau	ipplies. On the top of ar se you do not have prin	y additional pages, writ narily consumer debts o	e your name and r because of
1. Wh	at is your marital and filing status? Check one on	y.			
	Not married. Fill out Column A, lines 2-11.				
	Married and your spouse is filing with you. Fill ou	t both Columns A and B, lines	2-11.		
	Married and your spouse is NOT filing with you. \	ou and your spouse are:			
_	☐ Living in the same household and are not legal	•			
[Living separately or are legally separated. Fill of penalty of perjury that you and your spouse are left living apart for reasons that do not include evading	gally separated under nonban	kruptcy law that applie	s or that you and your	
101(10 the 6 n	the average monthly income that you received from all stands. A). For example, if you are filing on September 15, the 6-months, add the income for all 6 months and divide the total as own the same rental property, put the income from that property.	onth period would be March 1 throu by 6. Fill in the result. Do not include	ugh August 31. If the amo de any income amount mo	unt of your monthly incomore than once. For examp	ne varied during le, if both
			Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
	ar gross wages, salary, tips, bonuses, overtime, a roll deductions).	and commissions (before all	\$	\$	
	mony and maintenance payments. Do not include _l umn B is filled in.	payments from a spouse if	\$	\$	
of y from and	amounts from any source which are regularly pa you or your dependents, including child support. In an unmarried partner, members of your household I roommates. Include regular contributions from a spid in. Do not include payments you listed on line 3.	Include regular contributions your dependents, parents,	\$	\$	
5. Ne t	income from operating a business, profession,				
_		Debtor 1			
1	ss receipts (before all deductions)	\$			
	linary and necessary operating expenses	- c Conv here ->	\$	\$	
	monthly income from a business, profession, or farm income from rental and other real property	1\$ Copy here ->	Ψ	Ψ	
6. Ne t	moonie nom remai and other real property	Debtor 1			
Gro	ss receipts (before all deductions)	\$			
	linary and necessary operating expenses	- \$			
	monthly income from rental or other real property	\$ Copy here ->	\$	\$	
	erest, dividends, and royalties		\$	\$	

Case 22-40822 Doc 1 Filed 03/25/22 Entered 03/25/22 10:27:22 Main Document Pg 53 of 63

Debtor 1 Brian Joseph Raines Case number (if known)

				Column A		Column B		
				Debtor 1		Debtor 2 or non-filing s		
8.	Unemployment compensation			\$		\$		
	Do not enter the amount if you contend that the amount the Social Security Act. Instead, list it here:		under					
	For you\$		_					
	For you \$ For your spouse \$		_					
9.	Pension or retirement income. Do not include any ambenefit under the Social Security Act. Also, except as so not include any compensation, pension, pay, annuity, or United States Government in connection with a disability disability, or death of a member of the uniformed service pay paid under chapter 61 of title 10, then include that places not exceed the amount of retired pay to which you if retired under any provision of title 10 other than chapter 10 other 10 other than chapter 10 other 10 ot	nount received that was a tated in the next sentence allowance paid by the ty, combat-related injury ses. If you received any reay only to the extent that would otherwise be ent	e, do or etired at it	\$		\$		
10.	Income from all other sources not listed above. Sp Do not include any benefits received under the Social Sunder the Federal law relating to the national emergency under the National Emergencies Act (50 U.S.C. 1601 ecoronavirus disease 2019 (COVID-19); payments receir crime, a crime against humanity, or international or don compensation pension, pay, annuity, or allowance paid Government in connection with a disability, combat-related to a member of the uniformed services. If necess separate page and put the total below	Security Act; payments many declared by the President seq.) with respect to the ved as a victim of a war nestic terrorism; or all by the United States ated injury or disability, o	nade dent e					
	·		_	\$		\$		
			_	\$		\$		
	Total amounts from separate pages, if any.		+	\$		\$		
11.	Calculate your total current monthly income. Add line each column. Then add the total for Column A to the to 2: Determine Whether the Means Test Applies to	tal for Column B.	\$		+ \$		Total cui	rent monthly
12.	Calculate your current monthly income for the year	. Follow these steps:						
	12a. Copy your total current monthly income from line	•		Copy I	ine 11 he	ere=>	\$	
	Multiply by 12 (the number of months in a year)						x 12	2
	12b. The result is your annual income for this part of the	e form				12b.	\$	
13.	Calculate the median family income that applies to	you. Follow these steps:						
	Fill in the state in which you live.							
	Fill in the number of people in your household.							
	Fill in the median family income for your state and size To find a list of applicable median income amounts, go for this form. This list may also be available at the bank	online using the link spe	cified i	n the separate	instruction	13. ons	\$	
14.	How do the lines compare?							
	 Line 12b is less than or equal to line 13. O Go to Part 3. Do NOT fill out or file Official Line 12b is more than line 13. On the top of 	Form 122A-2.						M 2
	14b. Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A–2.	or page i, check box 2, 7	ne pre	รงนเทยแบท บโ สเ	Juse is a	эсенниней Бу	1-01111 122	M-2.
Part								
	By signing here, I declare under penalty of perjury	that the information on t	his sta	tement and in	any attac	hments is tru	ue and cor	rect.
	X /s/ Brian Joseph Raines Brian Joseph Raines							

Official Form 122A-1

Case 22-40822 Doc 1 Filed 03/25/22 Entered 03/25/22 10:27:22 Main Document Pg 54 of 63

Debtor 1	Brian Joseph Raines	Case number (if known)	
	Signature of Debtor 1		
Da	te March 25, 2022 MM / DD / YYYY		
	If you checked line 14a, do NOT fill out or file Form 122A-2.		
	If you checked line 14b, fill out Form 122A-2 and file it with this form.		

Case 22-40822 Doc 1 Filed 03/25/22 Entered 03/25/22 10:27:22 Main Document Pg 55 of 63

Fill	in this int	orma	tion to identify your case:		
Deb	tor 1	Br	ian Joseph Raines		
	tor 2 ouse, if fili	ng)			
Unit	ed States	Bank	ruptcy Court for the: Eastern District of Missouri		
Cas	e number nown)				☐ Check if this is an amended filing
			m 122A - 1Supp of Exemption from Presumption of A	Ab	use Under § 707(b)(2) 12/15
File fexen	this supp npted frousions in ired by 1	lemer m a p this s	nt together with Chapter 7 Statement of Your Current Monthly resumption of abuse. Be as complete and accurate as possible statement applies to only one of you, the other person should of C. § 707(b)(2)(C).	<i>Incor</i> e. If t	me (Official Form 122A-1), if you believe that you are wo married people are filing together, and any of the
Pari	lo lo	lentify	the Kind of Debts You Have		
1.	personal	, fami	s primarily consumer debts? Consumer debts are defined in 11 ly, or household purpose." Make sure that your answer is consistening for Bankruptcy (Official Form 1).		
			Form 122A-1; on the top of page 1 of that form, check box 1, <i>Ther</i> ement with the signed Form 122A-1.	e is n	no presumption of abuse, and sign Part 3. Then submit this
	☐ Yes.		· ·		
		00 10	· · · · · ·		
Par	2: D	etern	ine Whether Military Service Provisions Apply to You		
2.	Are you	a dis	abled veteran (as defined in 38 U.S.C. § 3741(1))?		
	□ No.	Go to	line 3.		
		•	ou incur debts mostly while you were on active duty or while you we S.C. § 101(d)(1); 32 U.S.C. § 901(1).	ere pe	erforming a homeland defense activity?
		No.	Go to line 3.		
		Yes.	Go to Form 122A-1: on the top of page 1 of that form, check box 1 submit this supplement with the signed Form 122A-1.	, The	ere is no presumption of abuse, and sign Part 3. Then
3.	Are you	or ha	ve you been a Reservist or member of the National Guard?		
	□ No.	Con	plete Form 122A-1. Do not submit this supplement.		
	☐ Yes.	Wer	e you called to active duty or did you perform a homeland defense	activi	ity? 10 U.S.C. § 101(d)(1); 32 U.S.C. § 901(1).
		No.	Complete Form 122A-1. Do not submit this supplement.		
		Yes.	Check any one of the following categories that applies:		
			I was called to active duty after September 11, 2001, for at leas 90 days and remain on active duty.	st	If you checked one of the categories to the left, go to Form 122A-1. On the top of page 1 of Form 122A-1, check box 3, <i>The Means Test does not apply now</i> , and sign Part 3. Then
			I was called to active duty after September 11, 2001, for at least 90 days and was released from active duty on which is fewer than 540 days before I file this bankruptcy case.	st .,	submit this supplement with the signed Form 122A-1. You are not required to fill out the rest of Official Form 122A-1 during the exclusion period. The <i>exclusion period</i> means the time you are on active duty or are performing a
			I am performing a homeland defense activity for at least 90 da	ays.	homeland defense activity, and for 540 days afterward. 11 U.S.C. § 707(b)(2)(D)(ii).
			I performed a homeland defense activity for at least 90 days, ending on, which is fewer than 540 days befor file this bankruptcy case.	e I	If your exclusion period ends before your case is closed, you may have to file an amended form later.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$78	administrative fee
+ \$15	trustee surcharge
\$338	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee \$571 administrative fee

\$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	administrative fee
_	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Case 22-40822 Doc 1 Filed 03/25/22 Entered 03/25/22 10:27:22 Main Document Pg 59 of 63

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/forms/bankruptcy-forms

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses.

In Alabama and North Carolina, go to: http://www.uscourts.gov/services-forms/bankruptcy/cre dit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 22-40822 Doc 1 Filed 03/25/22 Entered 03/25/22 10:27:22 Main Document Pg 60 of 63

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Eastern District of Missouri

In	re Brian Joseph Raines		Case No		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPEN	NSATION OF ATTOR	NEY FOR D	EBTOR(S)	
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(compensation paid to me within one year before the filin be rendered on behalf of the debtor(s) in contemplation of	g of the petition in bankruptcy,	or agreed to be pai	d to me, for services	
	For legal services, I have agreed to accept		\$	5,000.00	
	Prior to the filing of this statement I have received			5,000.00	
	Balance Due		\$	0.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed compe	ensation with any other person t	inless they are men	mbers and associates	of my law firm.
	☐ I have agreed to share the above-disclosed compensa copy of the agreement, together with a list of the name				law firm. A
5.	In return for the above-disclosed fee, I have agreed to re-	nder legal service for all aspects	of the bankruptcy	case, including:	
	 a. Analysis of the debtor's financial situation, and rende b. Preparation and filing of any petition, schedules, state c. Representation of the debtor at the meeting of credito d. [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on how 	ement of affairs and plan which ors and confirmation hearing, and educe to market value; exe ns as needed; preparation	may be required; d any adjourned he mption planning	earings thereof;	filing of
6.	By agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any dis any other adversary proceeding.	does not include the following chargeability actions, judic	service: sial lien avoidan	ces, relief from st	ay actions or
		CERTIFICATION			
this	I certify that the foregoing is a complete statement of any bankruptcy proceeding.	agreement or arrangement for	payment to me for	representation of the	debtor(s) in
<u>-</u>	March 25, 2022 Date	Isl Robert E. Eggmar Robert E. Eggmar Signature of Attorney Carmody MacDon 120 S. Central Ave Saint Louis, MO 6 314-854-8600 Fax ree@carmodymac	an 37374 ald P.C. e., Suite 1800 3105 c: 314-854-8660		

Case 22-40822 Doc 1 Filed 03/25/22 Entered 03/25/22 10:27:22 Main Document Pg 61 of 63

United States Bankruptcy Court Eastern District of Missouri

In re	Brian Joseph Raines		Case No.	
		Debtor(s)	Chapter	7
	VERIFICA'	TION OF CREDITOR M	IATRIX	
contai compl	The above named debtor(s) hereby ce ning the names and addresses of my cr	•		
compi	ctc.			
		/s/ Brian Joseph Rai	nes	
		Brian Joseph Raines	5	
		Debtor Signature		
		Dated: March 25.	2022	

Alphaeon Credit PO BOX 6580965 Dallas, TX 75265

Altus Receivables Management 2400 Veterans Memorial Blvd., Ste. 300 Kenner, LA 70062

B. Raines & Associates Inc. 7733 Forsyth Blvd., 11th Floor Saint Louis, MO 63105

Capitol One 1680 Capital One Dr McLean, VA 22102

Chase - Southwest P.O. Box 6294 Carol Stream, IL 60197

Christopher Olsem Miller 120 S. Central Ave., Suite 700 Saint Louis, MO 63105

Ford Motor Credit PO Box 650574 Dallas, TX 75265

Ford Motor Credit P.O. Box 650574 Dallas, TX 75265

Fundbox 6900 Dallas Parkway Plano, TX 75024

Grand Vacations Services, LLC Sunrise Park City LLC 6355 Metrowest Blvd. Orlando, FL 32835

Hilton American Express 200 Vesey Street New York City, NY 10285

Hubble Law 5353 South Lindbergh Blvd. Suite 210 St. Louis, MO 63126

Internal Revenue Service P.O. Box 7346 Philadelphia, PA 19101-7346 Jay B. Umansky, Esq. 12460 Olive Blvd., Ste. 118 Saint Louis, MO 63141

John and Donna Freese 315 Mississippi Ave. Crystal City, MO 63019

Kevin Smith 807 Eleonore Stret New Orleans, LA 70115

Mark Thomas Bishop Court House Square P.O. Box 740 Hillsboro, MO 63050

Missouri Department of Revenue Bankruptcy Unit P.O. Box 475 301 West High Street Jefferson City, MO 65105

Missouri Divison of Employment Security PO BOX 59 Jefferson City, MO 65104

Rachel Barnidge 7025 Cornell Ave. Saint Louis, MO 63130

Regions Bank 180 Richardson Crossing Arnold, MO 63010

Small Business Administration 14925 Kingsport Rd Fort Worth, TX 76155

SRS Distributions 12460 Olive Blvd. St. Louis, MO 63141

STL Programs
PO Box 20586
St. Louis, MO 63139

Summers Compton Wells 903 S. Lindbergh St. Louis, MO 63131

The Grand Islander Waikiki Honolulu 6355 Metrowest Blvd. Attn: Portfolio Services Orlando, FL 32835